

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)

Sandy Adams

(b) Address (number and street)

P. O. Box 1566

(c) City, State and ZIP Code

Orlando

FL

32802

☐ Check if address changed

2. Identification Number

H0FL24049

3. Is This Statement

☒ New (N)

OR

☐ Amended (A)

4. Party Affiliation

REPUBLICAN PARTY

5. Office Sought

House

6. State &amp; District of Candidate

FL 24

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2010 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)

Sandy Adams for Congress

(b) Address (number and street)

P. O. Box 1566

(c) City, State and ZIP Code

Orlando

FL

32802

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Founders Joint Candidate Committee

(b) Address (number and street)

229 S. Washington Street. #115

(c) City, State and ZIP Code

Alexandria

VA

22314

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

Signature of Candidate

Sandy Adams

Date

09/22/2010

**NOTE:** Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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